IFWG



| JUN 2 6 2006 | TO THE STATE OF TH | | : | <i>1</i> | | | | |
|--|--|----------|--|---|--|--|--|--|
| JOIN Z O ZOOO | | Ap | pplication Number | 10/826,973 | | | | |
| TRANSMITTAL FORM | | | ing Date | April 16, 2004 | | | | |
| | | | st Named Inventor | Gregory E. Niles | | | | |
| (to be used for all correspondence during pendency of filed application) | | Gr | oup Art Unit Number | 2628 | | | | |
| | | | aminer Name | Jason Michael Repko | | | | |
| Total Number of Pag | Total Number of Pages in This Submission 23 | | torney Docket Number | P3331US1 (18602-08906) | | | | |
| Fee Transmittal | ENCLOSURES (check all that apply) Fee Transmittal Form (in duplicate) Issue Fee Transmittal | | | | | | | |
| Check Enclosed Return Receipt Postcard Response to Notice to File Missing Parts Assignment & Rec⊎rdation Cover Sheet Deciaration Power of Attorney Application Data Sheet Information Disclosure Statement & PTO/SB/08A Copies of IDS Cited References Request for Corrected Filing Receipt Request for Correction of Recorded Assignment Amendment/Response: 16 Page(s) After Final Status Request Revocation and Substitute Power of Attorney REMARKS: ** "Total Number of Pages in this Submissi | | | Letter to Chief Draftsperson Formal Drawing(s): [] Sheet(s) of Figure(s) [] Appeal Communication to Board of Appeals and Interferences Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) Certified Copy of Priority Document(s) After Allowance Communication to Group | | | | | |
| | SIGNATURE O | - AT | TORNEY OR AGE | NT | | | | |
| Signature: | Labor | <u>s</u> | لم | | | | | |
| Attorney/Reg. No.: Sabra-Anne R. Truesdale, Reg. No. 55,687 Dated: 6-20-06 | | | | | | | | |
| | | | E OF MAILING | ited with the United States Postal Service as | | | | |

I hereby certify that this correspondence, including the enclosures identified above, is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below. If the Express Mail Mailing Number is filled in below, then this correspondence is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service pursuant to 37 CFR 1.10.

Signature: Sabra-Anne R. Truesdale Typed or Printed Name:

Express Mail Mailing Number (optional):

Dated:

| JUN 2 6 2006 B | | | | | | |
|---|-------------------|----------------------|------------------------|--|--|--|
| TRANSMITTAL | | Complete if Known | | | | |
| | | Application Number | 10/826,973 | | | |
| | | Filing Date | April 16, 2004 | | | |
| for FY 2 | 006 | First Named Inventor | Gregory E. Niles | | | |
| Patent fees are subject to a | annual revision. | Examiner Name | Jason Michael Repko | | | |
| ☐ Applicant claims small entity status. | . See 37 CFR 1.27 | Art Unit | 2628 . | | | |
| TOTAL AMOUNT OF PAYMENT | (\$) 300.00 | Attorney Docket No. | P3331US1 (18602-08906) | | | |

| METHOD OF PAYMENT (check all that apply) | | FEE CALCULATION (continued) | | | | | | |
|--|--|---|--|---|--|----------|--|--|
| □ Check □ Credit Card □ Money Order □ Other □ None □ Deposit Account: | | 3. ADDITIONAL FEES | | | | | | |
| Deposit Account Number 19-2555 | Large F | Entity | Small | Entity | Fee Description | Fee Paid | | |
| Deposit Account Name Fenwick & West LLP | Fee Code | Fee (\$) | Fee Code | Fee (\$) | | | | |
| The Commissioner is authorized to: (check all that apply) ☐ Charge fee(s) indicated below ☐ Credit any overpayments ☐ Charge all required fee(s) or any underpayment of fee(s) due under 37 CFR §1.16 or §1.17 during the pendency of this application | | 130 50 130 2,520 | | 65 25 130 2,520 | Surcharge - late filing fee or oath or declaration Surcharge - late provisional filing fee or cover sheet Non-English specification For filing a request for <i>ex parte</i> reexamination | | | |
| Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account. | | 920* | 1804 1805 | 920* 1.840* | Requesting publication of SIR prior to Examiner action | | | |
| FEE CALCULATION | | 1,840* 120 | 2251 | 60 | Requesting publication of SIR after Examiner action Extension for reply within first month | 120 | | |
| 1. BASIC FILING FEE Large Entity Small Entity Fee Fee Fee Fee Fee Fee Description SUBTOTAL (1) (\$) .00 2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE Extra Claims Fee from below Fee Paid Total Claims 29 -82**= 0 | 1251 1252 1253 1254 1255 1401 1402 1403 1451 1452 1453 1501 1502 1503 1460 | 450 1020 1,590 2,160 500 1000 1,510 500 1,500 1,400 800 1100 | 2251 2252 2253 2254 2255 2401 2402 2403 1451 2452 2453 2501 2502 2503 1460 | 225 510 795 1,080 250 250 500 1,510 250 750 700 400 550 | Extension for reply within second month Extension for reply within third month Extension for reply within fourth month Extension for reply within fifth month Notice of Appeal Filing a brief in support of an appeal Request for oral hearing Petition to institute a public use proceeding Petition to revive - unavoidable Petition to revive - unintentional Utility issue fee (or reissue) Design issue fee Plant issue fee Petitions to the Director | 120 | | |
| Multiple Dependent = 0 | 1807 | 50 | 1807 | 50 | Processing fee for Provisional Applications | | | |
| Large Entity Small Entity | | 180 | 1806 | 180 | Submission of Information Disclosure Stmt | 180 | | |
| Fee Fee Fee Fee Description 1202 50 2202 25 Claims in excess of 20 | 8021 1809 | 40 790 | 8021 2809 | 40 395 | Recording each patent assignment per property (times number of properties) | | | |
| 1202 50 2202 25 Claims in excess of 20 1201 200 2201 100 Independent claims in excess of 3 | 1810 | 790 | 2810 | 395 | Filing a submission after final rejection (37 CFR 1.129(a)) For each additional invention to be examined | <u> </u> | | |
| | 1801 | 790 | 2801 | 395 | (37 CFR 1.129(b)) Request for Continued Examination (RCE) | | | |
| 1203 360 2203 180 Multiple dependent claim, if not paid 1204 200 2204 100 **Reissue independent claims over original patent | 1802 | 900 | 1802 | 900 | Request for expedited examination of a design application | | | |
| 1205 50 2205 25 **Reissue claims in excess of 20 and over original patent | Other fee (specify) | | | | | | | |
| SUBTOTAL (2) (\$) .00 "or number previously paid, If greater, For Reissues, see above | *Reduce | ed by Basic | c Filing F | ee Paid | SUBTOTAL (3) (\$) 300 | | | |

| SUBMITTED BY | | | Complete (if applicable) | | |
|-------------------|-------------------------|-----------------------------------|--------------------------|--|--------------------------|
| Name (Print/Type) | Sabra-Anne R. Truesdale | Registration No. (Attorney/Agent) | 55,687 | | Telephone (650) 335-7187 |
| Signature | Saorele | | | | 6-22-06 |